



TOWN OF WESTPORT

APPLICATION FOR DEMOLITION PERMIT

1. _____
ADDRESS OF WORK

2. _____
NAME & ADDRESS OF PROPERTY OWNER TELEPHONE

3. _____
DEMOLITION CONTRACTOR LICENSE NUMBER

CONTACT PERSON TELEPHONE

☐ CERTIFICATE OF INSURANCE

DESCRIPTION OF WORK: _____

4. SUBMISSION REQUIREMENTS: Assessors Card Showing Date Built: _____

IF THE STRUCTURE TO BE REMOVED IS OLDER THAN 60 YEARS, PLEASE SEE THE NEXT PAGE FOR FURTHER INSTRUCTIONS. (Publication in local newspaper required)

CONTACT NAMES & NUMBERS FOR OBTAINING SHUT OFF NOTICES:

- | | | | |
|---|--|----------------|--------------------|
| <input type="checkbox"/> ASBESTOS ABATEMENT | Any local asbestos company is acceptable | | |
| <input type="checkbox"/> AQUARION WATER COMPANY | George Gonzalez | (203) 337-5949 | FAX (203) 337-5837 |
| <input type="checkbox"/> CABLEVISION | Janae Van Duzen | (203) 750-5621 | FAX (203) 354-0929 |
| <input type="checkbox"/> CONN. LIGHT & POWER | Barbara DePina | (203) 845-3440 | FAX (203) 845-3614 |
| <input type="checkbox"/> FUEL TANK (For underground tanks) | Fire Marshall's Office | (203) 341-5020 | FAX (203) 341-5009 |
| <input type="checkbox"/> PROPANE TANK | From the propane company that installed the tank | | |
| <input type="checkbox"/> GAS COMPANY | Michael Simoneau | (203) 795-7792 | FAX (203) 795-7784 |
| <input type="checkbox"/> SBC COMMUNICATIONS | (Residential) | (203) 420-2857 | FAX (203) 238-0434 |
| | (Business) | (800) 448-1008 | |
| <input type="checkbox"/> CONSERVATION DEPARTMENT | Colin Kelly | (203) 341-1170 | FAX (203) 341-1088 |
| <input type="checkbox"/> HEALTH DEPARTMENT | Jeff Andrews | (203) 227-9571 | |
| (If on Septic) | | | |
| <input type="checkbox"/> PUBLIC WORKS DEPARTMENT | Chris Kiosse | (203) 341-1793 | |
| (If on Sewer) | | | |
| <input type="checkbox"/> NOTIFICATION OF ADJACENT PROPERTY OWNERS BY OWNER (LIST OF NAMES & ADDRESSES MAY BE OBTAINED FROM THE ASSESSORS OFFICE) - LETTERS MUST BE COPIED TO THE BUILDING DEPT. | | | |

I THE UNDERSIGNED, hereby affirm and attest that I am familiar with the requirements and provisions of the Connecticut Basic Building Code, the State statute concerning Historic Districts, and the Demolition Delay Ordinance, of the Town of Westport as they apply to the work described above, and I agree to satisfy those requirements in every portion of that work, and to give the applicable local and state requirements precedence.

I ALSO CERTIFY that I am the OWNER of the Property herein described, and that I have the necessary legal right and authority to proceed with the work herein outlined, and that the information I have given is true and correct to the best of my knowledge.

Owner: _____

SIGNATURE OF CONTRACTOR: _____

SIGNATURE OF BUILDING OFFICIAL: _____

PERMIT ORDINANCE FOR HOUSES OVER 60 YEARS OLD

The TOWN OF WESTPORT has a demolition delay ordinance, Sec. 17-2, that interested parties may invoke providing a 90 day waiting period prior to the granting of a demolition permit. The ordinance, developed under the enabling powers provided in C. G. S. Section 29-406(b), allows interested parties to explore alternatives to demolition. The Historic District Commission (HDC) acts as an interested party when invoking a request for a demolition delay for properties greater than 60 years old, or properties identified on the Historic Resources Survey.

C.G.Sc. Chapter 97a. Section 7-147j empowers the HDC to review all demolitions within local historic districts or of designated local historic properties and require property owners to obtain a certificate of appropriateness for such demolitions.

APPLICABLE ONLY IF PROPERTY IS OLDER THAN 60 YEARS

Meeting Date of Historic District Commission to consider delay of demolition: _____

The HDC meets the second Tuesday of every month. The applicant will receive a copy of the agenda. If you have questions, please call the Historic District Commission at 341-1111.

APPLICABLE ONLY IF PROPERTY IN LOCAL HISTORIC DISTRICT OR DESIGNATED HISTORIC PROPERTY

A. Obtain Certificate of Appropriateness from Historic District Commission

B. Obtain shut off notices (**effective ONLY after expiration of 30 day notification or additional 60 day extension period*)

I THE UNDERSIGNED hereby affirm and attest that I am familiar with the requirements and provisions of the Connecticut Basic Building Code, the State statute concerning Historic Districts, and the Demolition Delay Ordinance, of the Town of Westport as they apply to the work described above, and I agree to satisfy those requirements in every portion of that work, and to give the applicable local and state requirements precedence.

I HEREBY CERTIFY that I am the OWNER of the Property herein described, and that I have the necessary legal right and authority to proceed with the work herein outlined, and that the information I have given is true and correct to the best of my knowledge.

PRINT NAME _____ SIGNATURE _____ DATE _____
OWNER OWNER

FOR HISTORIC DISTRICT COMMISSION USE:

☐ The Historic District Commission considers the property historically significant and requests an additional 60 day delay.

☐ The Historic District requests no delay. The Structure may be demolished once all Building Department requirements are met.

SIGNATURE OF HDC OFFICIAL _____

The HDC will return this form to the Building Department so the Building Department may process your Demolition Permit.